

CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

2013 JUL 26 AM 9: 13

Please type or print legibly. Instructions are included on back of application.

SECRETARY OF STATE STATE OF IDAHO

The assumed business name which business is:	ch the undersigned use(s) in the transaction of
Lustig House	
The true name(s) and <u>business</u> act business under the assumed business <u>Name</u> Don Lustig Morna Lustig	ddress(es) of the entity or individual(s) doing iness name: Complete Address 216 Substation Rd Cottonwood ID 83522 216 Substation RD Cottonwood ID 83522
Retail Trade Tran	sacted under the assumed business name is: sportation and Public Utilities struction culture
☐ Manufacturing ☐ Mini ☐ Finance, Insurance, and Re	ing Submit Certificate of Assumed Business
 The name and address to which f correspondence should be address Don Lustig 	ssed: 450 North 4th Street PO Box 83720
216 Substation RD	Boise ID 83720-0080 208 334-2301
Cottonwood ID 83522	255 55 7 250
5. Name and address for this acknown copy is (if other than # 4 above):	
(1) 12.1	Secretary of State use only
ignature / MWe-7	
rinted Name: Don Lustig	
apacity/Title: Owner	
ignature: Mould Juliy	IDAHO SECRETARY OF STATE 07/26/2013 05:00
rinted Name: Moma Lustig	CK: 6295 CT: 285715 BH: 1383627 1 9 25.00 = 25.00 ASSUM NAME #
Capacity/Title: Owner	1 & C7-00 - C2-00 U2001 JUNE 4

D164740